NORTH SAN DIEGO COUNTY REALTORS®

Office Use
Member # _____
Office # _____
☐New ☐Reinstate
Join Date _____

APPLICATION FOR AFFILIATE MEMBERSHIP

APPLICANT INFORMATION

☐ **New Affiliate Application** ☐ **Existing Affiliate Change**

Name: _____

Home Address: _____

Preferred Contact Phone: _____ Date of Birth: ___ ___ /___ ___ /___ __

Email: _____ Website: _____

NMLS#: _____ Exp Date: _____ (Lenders Only)

COMPANY INFORMATION

Office Name: _____ Office Phone: _____

Office Address: _____

Website: _____ Type of Business: _____

General Terms and Conditions of Affiliate Membership

I agree to abide by the bylaws, policies, and rules of the North San Diego County REALTORS®. Initials: _____

I understand that my Association membership dues and fees are non-refundable. In the event I fail to maintain eligibility for membership, or wish to terminate membership, for any reason, I understand I will not be entitled to a refund of my dues and fees. Initials: _____

I understand that aff membership with the North San Diego County REALTORS® is an individual membership and is non-transferable. Initials: _____

I irrevocably waive all claims against the North San Diego County REALTORS® or any of its officers, directors, or members for any act in connection with the business of the Association and particularly as to its or their act in electing or failing to elect, advancing, suspending, expelling, or otherwise disciplining me as a member. Upon the expiration of said membership for any cause I will return to the association all membership cards, certificates, signs, seals or other indications of membership in the NSDC REALTORS® and the California Association of REALTORS®. Initials: _____

By signing below, I authorize the Association, including its local, state, and national subsidiaries or representatives to fax, e-mail, telephone, send by U.S. Mail to me material advertising the availability of or quality of any property, goods or services offered, endorsed, or promoted by the Association. The Association does not sell or distribute your email for commercial purposes. Initials: _____

I certify that I have read and agree to the terms and conditions of this application and that all information given in this application is true and correct.

Signature: _____ Date: _____

Payment Information:

Name on Card: _____

Card Number: _____ Exp. Date: _____

Please check services you would like to purchase:

- ☐ Membership: $75 *Application fee + $_____ *Annual Dues (Pro-rate for New Applicants only)
- ☐ CAR Membership: $100 *Application fee +$225 *Annual Dues(optional)

Total to be charged: $_____ Signature: _____ Date: _____

*All Dues and Fees are subject to change 01/23